## Edgar Filing: ELLINGSEN DONALD A - Form 4

ELLINGSEN D	DONALD A										
Form 4											
May 05, 2006	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB	3235-0287		
Check this be if no longer subject to Section 16. Form 4 or Form 5 obligations may continue <i>See</i> Instruction 1(b).	<b>STATEN</b> Filed pur e. Section 17(	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Number:       January 31.         Expires:       2005         Estimated average       burden hours per         response       0.5		
ELLINGSEN DONALD A Sy			2. Issuer Name <b>and</b> Ticker or Trading Symbol NORTHWEST BANCORPORATION INC [nbct]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			(Month/D					X_ Director 10% Owner Officer (give title Other (specify below) below)			
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SPOKANE, W	A 99201							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	Transaction Date Month/Day/Year)	2A. Deen Execution any (Month/E	n Date, if	3. Transactio Code (Instr. 8)	(Instr. 3,	spose 4 and (A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common 05 Stock 05	5/05/2006			Code V J(1)	Amount 300	(D) A	Price \$ 18.47	2,800	D		
Common Stock								8,729	Ι	Spokane Eye Clinic	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ELLINGSEN DONALD A 421 WEST RIVERSIDE, SUITE 113 SPOKANE, WA 99201	Х						
Signatures							
Holly Austin, by power of attorney	05/05/2	.006					
**Signature of Reporting Person	Date						

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Director Compensation

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.